

FILE COPY

SERIAL NUMBER 09/410,367	FILING DATE 09/30/99	CLASS 382	GROUP ART UNIT 2721	ATTORNEY DOCKET NO. 01413.0009
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*corrected
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CONTINUING DOMESTIC DATA***
 VERIFIED

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371 (NAT'L STAGE) DATA***
 VERIFIED

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FOREIGN APPLICATIONS***
 VERIFIED

None SA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 10/25/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> who <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY WA	SHEETS DRAWING 50	TOTAL CLAIMS 62	INDEPENDENT CLAIMS 10
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Verified and Acknowledged <i>[Signature]</i> SA Examiner's Initials	FINNEGAN HENDERSON FARABOW GARRETT & DUNNER LLP 1300 I STREET NW WASHINGTON DC 20005-3315
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TITLE DATA PROCESSING, ANALYSIS, AND VISUALIZATION SYSTEM FOR USE WITH DISPARATE DATA TYPES

FILING FEE RECEIVED \$2,192	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Bib Data Sheet

CONFIRMATION NO. 6759

SERIAL NUMBER 09/410,367	FILING OR 371(c) DATE 09/30/1999 RULE	CLASS 382	GROUP ART UNIT 2623	ATTORNEY DOCKET NO. 01413.0009
APPLICANTS JEFFREY D. SAFFER, RICHLAND, WA; AUGUSTIN J. CALAPRISTI, RICHLAND, WA; NANCY E. MILLER, SAN DIEGO, CA; RANDALL E. SCARBERRY, RICHLAND, WA; SARAH J. THURSTON, RICHLAND, WA; DEBORAH A. PAYNE, RICHLAND, WA; GREGORY S. THOMAS, KENNEWICK, WA; LISA C. STILLWELL, RICHLAND, WA; CORY L. ALBRIGHT, RICHLAND, WA;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/25/1999				
Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY WA	SHEETS DRAWING 50	TOTAL CLAIMS 62
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance			INDEPENDENT CLAIMS 10
Verified and Acknowledged	Examiner's Signature	Initials		
ADDRESS 22852				
TITLE DATA PROCESSING, ANALYSIS, AND VISUALIZATION SYSTEM FOR USE WITH DISPARATE DATA TYPES				
FILING FEE RECEIVED 2264	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		